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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/797,513			ing Date 10/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	- CK	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	_	N/A	LD INO	N/A		N/A	122 (0)	ı	N/A	TLL (0)	
П	SEARCH FEE	or (c))	N/A		N/A		N/A		ı	N/A		
H	(37 CFR 1.16(k), (i), EXAMINATION FE		N/A		N/A		N/A		ı	N/A		
TO	(37 CFR 1.16(o), (p), FAL CLAIMS	or (q))	minus 20 =				X S =		OR	X S =		
	CFR 1.16(i)) EPENDENT CLAIM	s					x s =		OR	x s =		
(37	CFR 1.16(h))	16 th o	minus 3 = *  If the specification and drawin		an august 100	ı	A # -			A 5 -		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	n size fee due								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	08/30/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 24	Minus	·· 24	= 0	1	X \$25 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 3	Minus	···4	= 0	1	X \$100 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))											
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
Г							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT	03/17/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1801)	· 18	Minus	·· 24	= 0	l	X \$25 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	* 2	Minus	*** 4	= 0	1	X \$105 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))								1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						•	TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "2".  FRICA DANTZLER!  The "Highest Number Perviously Paid For IN THIS SPACE is less than 3, enter "3".  FRICA DANTZLER!											

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